EMT-BASIC			EMT-BASIC			
NAME			NAME			
STATION	☑ - Check box below when completed			ation is		
1. AED/CPR			1. AED/CPR			
2. AIRWAY			2. AIRWAY			
3. BLEEDING		О	3. BLEEDING			
4. SPLINTING			4. SPLINTING			
5. SPINAL			5. SPINAL			
	R MEDICAL ASSESSMENT		 	R MEDICAL ASSESSMENT		
EMT-BASIC		EMT-BASIC				
NAME			NAME			
STATION	☑ - Check box below when completed	station is	STATION	☑ - Check box below when st completed	ation is	
1. AED/CPR		О	1. AED/CPR			
2. AIRWAY		О	2. AIRWAY			
3. BLEEDING		σ	3. BLEEDING			
4. SPLINTING			4. SPLINTING			
5. SPINAL			5. SPINAL			
6. TRAUMA O	R MEDICAL ASSESSMENT	0	6. TRAUMA O	R MEDICAL ASSESSMENT		
			1 			
EMT-BASIC NAME				EMT-BASIC NAME		
NAME			I NAIVIE			
STATION	☑ - Check box below when completed	station is	STATION	☑ - Check box below when st completed	ation is	
1. AED/CPR		σ	1. AED/CPR			
2. AIRWAY			2. AIRWAY			
3. BLEEDING		σ	3. BLEEDING			
4. SPLINTING			4. SPLINTING			

5. SPINAL

6. TRAUMA OR MEDICAL ASSESSMENT

5. SPINAL

6. TRAUMA OR MEDICAL ASSESSMENT